



Customized Marketing Tools for Medicare Supplement Agents

Use This Form to Request Preparation of a personalized marketing tool.

You will receive a PDF as well as a jpeg via return Email.
There is a 1-time charge for each marketing tool ordered.

I would like to order a personalized version of the following Marketing Tools:

Price for agents listed on MedicareSupp.org (\$35-per) --- Price for non-listed agents (\$139-per)

Time for Medicare Open Enrollment (2018)

Complete & Return to Jesse Slome

E: jslome@medicaresupp.org

INFORMATION TO BE ENTERED IN THE PERSONALIZATION AREA (PLEASE PRINT OR TYPE)

Name _____

Phone Number _____

Email _____

Send Your Photo (a jpeg is preferable but any format will work) Email to: jslome@MedicareSupp.org

PAYMENT BY CHECK

Check: Make payable to American Association:

Mail to American Association, Attn: Jesse Slome, 32504 Carrie Place, Westlake Village, CA 91361

PAYMENT BY CREDIT CARD - Complete and Email this information

Amount \$ _____

Credit Card Number _____ Expiration Date _____

Security Number _____ Signature _____ Today's Date _____

Credit Card Billing Address _____ Zip Code _____

NO REFUNDS AFTER SUBMISSION

I authorize the charge to my credit card. NOTE: Your credit card billing statement may read "American Association" or something similar.

I understand that once I submit my order credit card charges applied are non refundable as the Association will incur time and charges for the preparation of personalized artwork.
